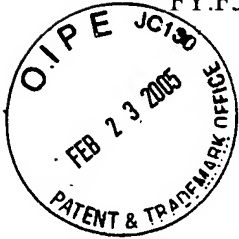


ITW

FY.F5642US2C

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant : Masayoshi Nanami et al.

) Group Art Unit 3617

Appl. No. : 10/717,034

) I hereby certify that this correspondence and all
) marked attachments are being deposited with the
) United States Postal Service as first-class mail in
) an envelope addressed to: Commissioner for
) Patents, P.O. Box 1450, Alexandria, VA 22313-
) 1450, on

Filed : November 18, 2003

For : CONTROL SYSTEM FOR
SMALL WATERCRAFT

February 17, 2005

(Date)

Examiner : Ajay Vasudeva

) Michael A. Guiliana, Reg. No. 42,611

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed November 18, 2004, Applicants respectfully submit the following amendments and comments in connection with the above-captioned application.

Amendments to the Specification begin on page 2 of this paper.

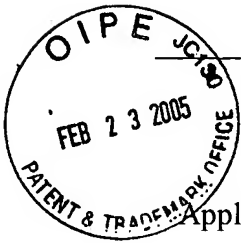
Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 6 of this paper.

02/24/2005 CCHAU1 00000027 10717034

01 FC:1201

200.00 OP



Please Direct All Correspondence to Customer Number **20995**

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Masayoshi Nanami et al.
 App. No : 10/717,034
 Filed : November 18, 2003
 For : CONTROL SYSTEM FOR SMALL WATERCRAFT
 Examiner : Ajay Vasudeva
 Art Unit : 3617

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

February 17, 2005

(Date)

Michael A. Guiliana, Reg. No. 42,611

Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment in 8 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	7 - 20 = 0	1202 (\$50)	0 x 50 =	\$0
Independent Claims	4 - 3 = 1	1201 (\$200)	1 x 200 =	\$200
			TOTAL FEE DUE	\$200

(X) A check in the amount of \$200 is enclosed.

(X) Return prepaid postcard.

(X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Michael A. Guiliana
 Registration No. 42,611
 Attorney of Record
 Customer No. 20,995
 (949) 760-0404